

Booklet 10

Glossary

Although these benefit descriptions include certain key features and brief summaries of King County regular employee and part-time Local 587 benefit plans, they are not detailed descriptions. If you have questions about specific plan details, contact the plan or Benefits and Retirement Operations. We've made every attempt to ensure the accuracy of this information. However, if there is any discrepancy between the benefit descriptions and the insurance contracts or other legal documents, the legal documents will always govern. King County intends to continue benefit plans indefinitely, but reserves the right to amend or terminate them at any time in whole or in part, for any reason, according to the amendment and termination procedures described in the legal documents. King County, as plan administrator, has the sole discretionary authority to determine eligibility for benefits and to construe the terms of the plans. This information does not create a contract of employment between King County and any employee.

Call 206-684-1556 for alternate formats.

Glossary

Accident. A sudden and unforeseen event that occurs at a specific time and place and results in bodily injury. It is independent of illness other than infection of a cut or wound received in an accident.

AdvancePCS. The organization contracted by King County to administer prescription benefits for its self-insured KingCare medical plans (AdvancePCS is not affiliated with Aetna).

Aetna. The organization contracted by King County to administer medical services for its self-insured KingCare medical plans and the life insurance plan (Aetna is not affiliated with AdvancePCS).

Allowable Amount – WDS. The maximum dollar amount allowed toward reimbursement for any service provided for a covered dental benefit.

Alveolar. Pertaining to the ridge, crest or process of bone that projects from the upper and lower jaw and supports the roots of the teeth.

Amalgam. A mostly silver filling often used to restore decayed teeth.

Annual Deductible. The amount plan participants pay each plan year before a plan pays benefits. The annual deductible does not apply to any out-of-pocket maximums.

Apicoectomy/Root Tip Amputation. Excision of the apical portion of a tooth's root to gain access to the periapical area to remove diseased tissue.

Associated Administrators Inc. (AAI). The organization contracted by King County to administer its flexible spending accounts, COBRA benefits and retiree benefits.

Beneficiary. The person or organization you designate to receive any life, AD&D or LTD insurance benefits payable at the time of your death.

Benefit Waiting Period – LTD. The continuous time you must be disabled before LTD benefits begin.

Blended Lenses. A bifocal with invisible segment lines in the reading area.

Bitewing X-ray. An x-ray that simultaneously shows the top visible part of the upper and lower molar teeth as well as part of their roots and supporting structures.

Brand-Name Drugs. Trademark drugs patented for a limited period by a single pharmaceutical company.

Bridge. Replacement for a missing tooth or teeth, consisting of the artificial tooth (pontic) and attachments to the adjoining abutment teeth (retainers). Bridges are cemented in place and are not removable.

Caries. Decay – a disease process initiated by bacterially produced acids on the tooth surface.

Caries Susceptibility Test. A test to determine how likely a person is to develop tooth decay, usually by measuring the concentration of certain bacteria in the mouth.

Chemical Dependency. A psychological and/or physical dependence on alcohol or a state-controlled substance. The pattern of use must be so frequent or intense that the user loses self-control over the amount and circumstances of use, develops symptoms of tolerance and, if use is reduced or discontinued, shows symptoms of physical and/or psychological withdrawal. The result is that health is substantially impaired or endangered, or social or economic function is substantially disrupted.

Chiropractic Care. Manipulation of the spine or extremities to correct a subluxation (incomplete or partial dislocation) identified on an x-ray. The subluxation must be consistent with the patient's neuromusculoskeletal

symptoms, and treatment must be within the limits of a specific documented treatment plan. Services must be provided by a state-licensed chiropractor or osteopath (chiropractors are restricted by law to manipulation of the spine; osteopaths are licensed to perform manipulative therapy to all parts of the body).

CIGNA. The organization contracted by King County to provide AD&D and LTD benefits.

COBRA. Consolidated Omnibus Budget Reconciliation Act. Implemented in 1986, COBRA allows you to continue your health coverage on a self-paid basis under certain circumstances for a limited time. King County offers all required COBRA rights and extends spouse rights to domestic partners.

Coinsurance. The amount a patient and a patient's plan share toward covered expenses after any annual deductible is met.

Composite. A tooth-colored filling, made of a combination of materials, used to restore teeth.

Contracted Professional/Contracted Specialist – Group Health. A network provider under the Group Health Medical Plan who is under contract to Group Health.

Controlled Substance 5. A federal legend drug that comes under the jurisdiction of the Controlled Substances Act. These medications consist of preparations containing limited quantities of certain narcotic drugs generally for antitussive (cough preparations) and antidiarrheal purposes. Examples include Robitussin A-C syrup and Naldecon-CX.

Copay. The fixed amount the patient pays at the time the covered service is received.

Covered Accident – AD&D. An event that causes bodily injuries while covered by the AD&D insurance plan. The bodily injury must directly result in a covered loss.

Covered Earnings – LTD. Covered earnings means an employee's amount of pay before considering any premium pay, taxes, bonuses, overtime pay or other extra compensation reported by King County for work performed just prior to the date disability begins.

CPI-W – LTD. The Consumer Price Index for Urban Wage Earners and Clerical Workers published by the U.S. Department of Labor. If the index is discontinued or changed, another comparable nationally published index will be used.

Crown. A restoration that replaces the entire surface of the tooth's visible portion.

Custodial or Convalescent Care. Care primarily to assist the patient in activities of daily living, including inpatient care mainly to support self-care and provide room and board. Examples are helping the participant to walk, get in and out of bed, bathe, dress, eat or prepare special diets or take medication that is normally self-administered.

Dental Care. Care of, or related to, the mouth, gums, teeth, mouth tissues, upper or lower jaw bones or attached muscle, upper or lower jaw augmentation or reduction procedures, orthodontic appliances, dentures and any care generally recognized as dental. This also includes related supplies and devices (but not prescription drugs).

Denture. A removable prosthesis that replaces missing teeth. A complete (full) denture replaces all upper or lower teeth; a partial denture replaces one to several missing upper or lower teeth.

DESI Drugs. Drugs that lack substantial evidence of effectiveness according to the FDA but since they have been used and accepted for many years without significant safety problems, they continue to be used today. Examples include Donnatal, Librax and Tigan suppositories.

Disability – AD&D. LTD disability determines disability for AD&D.

Disability – Life. You are considered permanently and totally disabled only if disease or injury stops you from working at your own job or any other job for pay or profit, and it must continue to stop you from working at any

reasonable job. A “reasonable job” is defined as any job for pay or profit that you are (or may reasonably become) fitted for by education, training or experience.

Disability – LTD. Disability occurs if, solely due to injury or illness, you are unable to perform all the material duties of your regular occupation and are unable to earn more than 80% of your indexed covered earnings from working in your regular occupation. Once you’ve received LTD benefits for 24 months, you are considered disabled if your injury or illness makes you unable to perform the material duties of any occupation for which you could reasonably become qualified (based on education, training or experience) and, solely due to injury or illness, you remain unable to earn more than 80% of your indexed covered earnings.

Disability – Medical. A condition determined to be disabling by the Social Security Administration, Washington State Department of Retirement Systems or the county-sponsored long term disability plan.

Durable Medical Equipment. Mechanical equipment that can stand repeated use and multiple users, is primarily and customarily used to serve a medical purpose, is generally not useful to a person in the absence of illness or injury and is prescribed by a physician.

Emergency – Medical. The sudden, unexpected onset of a medical condition that threatens loss of life or limb or may cause serious harm to the patient’s health if not treated immediately.

Endodontics. The diagnosis and treatment of dental diseases, including root canal treatment, affecting dental nerves and blood vessels.

Ethix. A Puget Sound network of medical providers contracted by Aetna on behalf of King County to provide services under the KingCare medical plans.

Evidence of Insurability (EOI). Any statement or proof of a person’s physical condition, occupation or other factor affecting his or her acceptance for insurance.

Exclusions. Services or supplies not covered under a plan.

Experimental or Investigational Services/Supplies. A treatment, procedure, facility, equipment, drug, drug usage, medical device or supply is considered experimental or investigational when it meets any of the following criteria at the time it is or will be provided to the plan participant:

- Cannot be legally marketed in the United States without the approval of the Food and Drug Administration (FDA) and such approval has not been granted
- Is the subject of a current new drug or new device application on file with the FDA
- Is provided as part of a Phase I or Phase II clinical trial, as the experimental or research arm of a Phase III clinical trial, or in any other manner intended to evaluate the service’s or supply’s safety, toxicity or efficacy
- Is provided under written protocol or other document that lists an evaluation of the service’s or supply’s safety, toxicity or efficacy among its objectives
- Is under continued scientific testing and research concerning safety, toxicity or efficacy
- Is provided under informed consent documents that describe the service or supply as experimental or investigational, or in other terms that indicate it is being evaluated for safety, toxicity or efficacy
- The prevailing opinion among experts as expressed in the published authoritative medical or scientific literature is that:
 - Use should be substantially confined to research settings, or
 - Further research is necessary to determine safety, toxicity or efficacy.

In determining whether a service or supply is experimental or investigational, the following sources of information are relied upon exclusively:

- The plan participant’s medical records
- Written protocol(s) or other document(s) under which the service or supply has been or will be provided
- Any consent documents(s) the plan participant or plan participant’s representative has executed or will be asked to execute to receive the service or supply

- The files and records of the Institutional Review Board (IRB) or similar body that approves or reviews research at the institution where the service or supply has been or will be provided, and other information concerning the authority or actions of the IRB or similar body
- The published authoritative medical or scientific literature regarding the service or supply, as applied to the plan participant's illness or injury
- Regulations, records, applications and any other documents or actions issued by, filed with or taken by the FDA, the Office of Technology Assessment or other agencies within the United States Department of Health and Human Services, or any state agency performing similar functions.

If two or more services or supplies are part of the same plan of treatment or diagnosis, all are excluded if one is experimental or investigational. The plans consult the appropriate professional staff and then use the previously specified criteria to decide if a particular service or supply is experimental or investigational.

Filled Resin. Tooth-colored plastic materials that contain glass-like particles to add strength and resistance to wear.

Fluoride. A substance that when topically applied or added to drinking water is effective in resisting tooth decay.

Fluoride Varnish. Fluoride treatment in a varnish base applied to reduce acid damage from bacteria that cause tooth decay.

FMLA. Family and Medical Leave Act. Implemented in 1993, FMLA allows you to take up to 12 weeks of unpaid, job-protected leave for certain family and medical reasons if you meet eligibility requirements.

Formulary. An authorized list of generic and brand-name prescription drugs approved for use by the FDA.

General Anesthesia. A drug or gas that produces unconsciousness and insensibility to pain.

Generic Drugs. Medications that are not trademark drugs, but are chemically equivalent to the brand-name drug.

Gingival Curettage. The process of removing or cutting diseased soft tissue surrounding the tooth.

Gross Monthly Benefit – LTD. Your monthly LTD benefit before any reduction of other income benefits or taxes.

Group Health. Group Health Cooperative. The organization contracted by King County to provide its HMO medical plan option.

HIPAA. Health Insurance Portability and Accountability Act. Effective in 1996, HIPAA restricts the extent to which group health plans may impose preexisting condition limits and protects plan participants' personal health information.

Hospice. A private or public agency or organization with a hospice agency license that administers or provides hospice care.

Hospital. An institution licensed by the state and - for compensation on behalf of its patients and on an inpatient basis - primarily engaged in providing diagnostic and therapeutic facilities for surgical and/or medical diagnosis as well as treatment and care of injured or ill persons by or under the supervision of a staff of physicians. The institution also continuously provides 24-hour nursing service by or under the supervision of registered nurses, or is any other licensed institution with which the medical plans have an agreement to provide hospital services. (Skilled nursing facilities, nursing homes, convalescent homes, custodial homes, health resorts, hospices or places for rest, the aged or the treatment of pulmonary tuberculosis are not hospitals.)

Iliac Crest. Top of the hip bone used for grafting bone onto the lower jaw.

Implant. A graft or insert set firmly onto or deeply into the alveolar area prepared for its insertion. It may support a crown or crowns, a bridge abutment, a partial denture or a complete denture.

Indexed Covered Earnings – LTD. For the first 12 months monthly LTD benefits are payable, indexed covered earnings will equal covered earnings. Afterward, indexed covered earnings will equal covered earnings plus an increase, applied each anniversary of the date monthly LTD benefits became payable. The amount of each increase is the lesser of:

- 10% of the employee's indexed covered earnings during the preceding year of disability, or
- Rate of increase in the CPI-W during the preceding calendar year.

Indexed Predisability Earnings – LTD. A recalculation of your predisability earnings after one year of disability and then on each anniversary, including an annual adjustment of the lesser of:

- 10%, or
- Annual percentage increase in the CPI-W for the prior calendar year.

Inlay. A dental filling shaped to the form of a cavity and then inserted and secured with cement.

Inpatient Services. Care provided to a patient who is hospitalized.

Intravenous Sedation. A form of sedation where the patient experiences a lowered level of consciousness but is still awake and can respond.

KCFML. King County Family and Medical Leave. Passed by King County Ordinance 13377 in 1998 and adopted by most but not all labor unions representing King County employees. Allows you to take up to 18 weeks of unpaid, job-protected leave for certain family and medical reasons if you meet eligibility requirements.

KingCare Basic and Preferred. King County's self-insured medical plans. Medical services are provided by Aetna and prescription services (pharmacy and mail order) are provided by AdvancePCS.

Legend Prescription Drugs. FDA approved drugs that require a prescription from an authorized prescriber.

Lifetime Maximum. The maximum benefit amount a plan participant may receive from a plan in his or her lifetime.

Limitations. Restricting conditions, such as age, time covered, and waiting periods.

Localized Delivery of Therapeutic Agents. Treating isolated areas of advanced gum disease by placing antibiotics or other germ-killing drugs into the gum pocket.

Medically Necessary. Health care services, supplies, treatments or settings considered appropriate and necessary, according to generally accepted principles of good medical practice, to diagnose or treat a medical condition.

Services, supplies, treatments or settings must meet all of these requirements:

- Are not solely for the convenience of the patient, his or her family or the provider of the services or supplies
- Are the most appropriate level of service or supply that can be safely provided to the patient
- Are for the diagnosis or treatment of an actual or existing illness or injury unless being provided for preventive services
- Are not for recreational, life-enhancing, relaxation or palliative therapy (except to treat terminal conditions)
- Are not primarily for research and data accumulation
- Are appropriate and consistent with the diagnosis and, in accordance with accepted medical standards in the state of Washington, could not have been omitted without adversely affecting the patient's condition or the quality of health services rendered
- As to inpatient care, could not have been received in a provider's office, the outpatient department of a hospital or a non-residential facility without affecting the patient's condition or quality of health services
- Are not experimental or investigational.

The plan participant is responsible for the cost of services and supplies that are not medically necessary.

The plans reserve the right to determine whether a service, supply, treatment or setting is medically necessary. The fact a physician or other provider has prescribed, ordered, recommended or approved a service, supply, treatment or setting does not, in itself, make it medically necessary.

Mental Condition. A condition classified as such by the most current edition of the Diagnostic and Statistical Manual of Mental Disorders.

Mental Disorder. Any mental, emotional, behavioral, psychological, personality, cognitive, mood or stress-related abnormality, disorder, disturbance, dysfunction or syndrome, regardless of cause, including any biological or biochemical disorder or imbalance of the brain. Mental disorder includes, but is not limited to, bipolar affective disorder, organic brain syndrome, schizophrenia, psychotic illness, manic depressive illness, depression and depressive disorders, anxiety and anxiety disorders.

Mutual Aid Agreement. Allows certain benefits to continue while you're away from the county if you are needed to work temporarily for another agency.

Network Benefits. The level of benefits you receive when you see a network provider. Network benefits are generally higher than non-network benefits.

Network Provider. A person, group, organization or facility under contract with a benefit plan to furnish covered services to plan participants.

Nightguard. See "Occlusal Guard."

Non-Network Benefits. The level of benefits you receive when you see a non-network provider.

Non-Network Provider. A person, group, organization or facility not under contract with a plan to furnish covered services to plan participants. Though some benefit plans allow use of non-network providers, they still must be licensed, registered or certified to provide covered services by the state in which they operate.

Non-Preferred Brand. Brand-name prescription drugs not preferred by a medical plan because they are considered no more effective but cost more than preferred brands.

Occlusal Adjustment. Modification of the occluding surfaces of opposing teeth to develop harmonious relationships between the teeth and neuromuscular mechanism, the temporomandibular joints and the structure supporting the teeth.

Occlusal Guard. A removable dental appliance, sometimes called a nightguard, to minimize the effects of grinding or gnashing the teeth.

Occlusion. The contact of the teeth of both jaws when closed or during the movements of the mandible in mastication (chewing).

Onlay. Restoration of the entire contact surface of the tooth.

Open Enrollment. The annual period when benefit-eligible employees may join a plan, change plans, add or increase AD&D coverage and add family members for coverage – within the limits of each benefit plan.

Orthodontic Treatment. The necessary procedures of treatment, performed by a licensed dentist, involving surgical or appliance therapy for movement of teeth and post-treatment retention.

Outpatient Services. Care provided to a patient who is not hospitalized, but who receives treatment at a licensed medical facility.

Overdenture. A removable denture constructed over existing natural teeth or implanted studs.

Panorex X-ray. An x-ray system using two points of rotation to obtain a panoramic view of the dental arches.

Periodontics. Diagnosis, prevention and treatment of diseases in gums and the bone that supports teeth.

Plan Year. The calendar year (January 1 to December 31).

Physical Disease. A physical disease entity or process that produces structural or functional changes in your body as diagnosed by a physician.

Physician. A provider licensed by the state in which he or she practices as:

- Doctor of medicine or surgery
- Doctor of osteopathy
- Doctor of ophthalmology
- Doctor of podiatry
- Registered nurse
- Chiropractor
- Dentist (DDS or DMD)
- Psychologist (if licensed by the state to practice psychology and in private practice).

The medical plans also cover providers licensed as a physician's or osteopath's assistant, certified as a nursing assistant, or licensed as a practical nurse or registered nurse's assistant, when that provider works with or is supervised by one of the above physicians.

Plaque. Flat masses of bacteria and debris on tooth surfaces.

Preauthorization – Medical. The medical plans' approval for services or supplies given before the patient receives them.

Predetermination – Dental. An advance estimate of dental care costs.

Predisability Earnings – LTD. The amount of your pay from the county each month before considering premium pay, bonuses, overtime pay, or other extra compensation and taxes. This amount is determined on the date coverage begins and changes on the date of any pay adjustment you receive if you are actively at work.

Preexisting Condition – LTD. A mental or physical condition for which you consulted a physician, received medical treatment or services or took prescribed drugs or medication during the three months before your coverage begins. The LTD plan does not pay benefits for preexisting conditions unless, on the date you become disabled, you have been continuously covered for at least 12 months and actively at work for at least one full day after those 12 months.

Preferred Brand. Brand-name prescription drugs preferred by a medical plan because of their clinical and economic value to the plan and its members. They're considered equally as effective but cost less than non-preferred brands.

Prescription Drug. Any medical substance that, under the Federal Food, Drug and Cosmetic Act (as amended), must be labeled with "Caution: federal law prohibits dispensing without a prescription."

Primary Care Physician (PCP). A physician who provides or coordinates care for plan participants.

Progressive Multifocal Lenses. A multifocal lens with invisible segment lines in the reading area. The process by which technicians make the lenses distinguishes the progressive multifocal lens from the blended lens.

Prophylaxis. The control of dental and oral diseases by preventive measures, especially the mechanical cleansing of the teeth.

Prosthesis. An artificial substitute to replace a missing natural body part.

Prosthodontics. The branch of dentistry that deals with the replacement of missing teeth or oral tissues by artificial means, such as bridges, dentures or implants.

Provider. A person, group, organization or facility licensed to provide plan services, equipment, supplies or drugs. For the medical plans, this includes but is not limited to naturopaths, acupuncturists and massage therapists. The provider must be practicing within the scope of his or her license.

Pulp Exposure Treatment (Pulp Capping). The covering of an exposed dental pulp with a material that protects it from external influences and does not interfere with pulpal healing. It stimulates the formation of secondary dentin in an effort to maintain the health and vitality of the tooth's pulp.

Pulpotomy. An operation by which the bulbous or crown portion of the dental pulp is removed.

Qualified Medical Child Support Order (QMCSO). A decree, judgment or order from a state court (including approval of a settlement agreement) or administrative order that requires benefit plans to include a child in the employee's coverage and make any applicable payroll deductions.

Rebase. A process of refitting a denture by replacing the denture base material without changing the occlusal relationships of the teeth.

Reline. To resurface the tissue side of a denture with a new base material so it will fit more accurately.

Respite Care. Time off or a break for someone who is the main caregiver for an aged, ill or disabled adult or child.

Restorative. A process used to replace a lost tooth or part, or the diseased portion of one, by artificial means as with a filling, crown, inlay or onlay to restore proper dental function.

Root Planing. A procedure done to smooth roughened root surfaces.

Salary. Your annual base pay excluding overtime, bonuses, premium pay or any other special pay.

Sealants. A resinous material designed for application to the surfaces of posterior teeth to seal the surface irregularities and prevent tooth decay.

Service Area. The geographic area where the plans have arranged for covered services through agreements with various providers.

Skilled Nursing Facility. A facility that provides room and board as well as skilled nursing care 24 hours a day and is accredited as an extended care facility or is Medicare certified as a skilled nursing facility. It is not a hotel, motel or place for rest or domiciliary care for the aged.

Staff Member/Staff Specialist – Group Health. A network provider under the Group Health Medical Plan who is part of the Group Health staff.

Temporomandibular Joint (TMJ) Disorders. Disorders with any of the following characteristics:

- Pain in the musculature associated with the TMJ
- Internal derangements of the TMJ
- Arthritic problems with the TMJ
- Abnormal range of motion or limited range of motion of the TMJ.

(The temporomandibular joint just ahead of the ear connects the mandible, or jawbone, to the temporal bone of the skull.)

Urgent Care. Medical services that do not constitute a medical emergency but need immediate medical attention.

USERRA. The Uniformed Services Employment and Reemployment Rights Act of 1994.

Usual, Customary and Reasonable Charge (UCR) – Medical. Rates consistent with those normally charged by the provider for the same services or supplies and within the general range of charges by other providers in the same area for the same services or supplies.

Vision Service Plan (VSP). The organization contracted by King County to administer its vision plan benefits.

Washington Dental Service (WDS). The organization contracted by King County to administer its dental plan benefits.

Women's Health Care Services. These include the following health care services:

- Maternity care
- Reproductive health services
- Gynecological care
- General exams and preventive care.

Work Earnings – LTD. Your gross monthly earnings from work you perform while disabled, including earnings from the county, another employer or self-employment.

Booklet 11

Resource Directory

Although these benefit descriptions include certain key features and brief summaries of King County regular employee and part-time Local 587 benefit plans, they are not detailed descriptions. If you have questions about specific plan details, contact the plan or Benefits and Retirement Operations. We've made every attempt to ensure the accuracy of this information. However, if there is any discrepancy between the benefit descriptions and the insurance contracts or other legal documents, the legal documents will always govern. King County intends to continue benefit plans indefinitely, but reserves the right to amend or terminate them at any time in whole or in part, for any reason, according to the amendment and termination procedures described in the legal documents. King County, as plan administrator, has the sole discretionary authority to determine eligibility for benefits and to construe the terms of the plans. This information does not create a contract of employment between King County and any employee.

Call 206-684-1556 for alternate formats.

Resource Directory

If no TTY phone number is listed, please call 711 to access the TTY Relay Service.

For Questions About ...	Contact ...
Accidental Death and Dismemberment (AD&D) Insurance <ul style="list-style-type: none"> • Conversion option • Secure travel benefits • For claims, contact Benefits and Retirement Operations 	CIGNA Phone 1-800-441-1832 (conversion) ■ 1-800-336-2485 (TTY) Worldwide Assistance Services Inc. (secure travel benefits) Phone 1-888-226-4567/1832 (US/Canada) ■ Call collect 202-331-7635 (all other locations) Fax 202-331-1528 Email cigna@worldwideassistance.com
Benefits – General <ul style="list-style-type: none"> • Eligibility (for part-time Local 587 plan eligibility, contact base chief) • Open enrollment and making changes • Flexible Spending Account enrollment • Life, accidental death and dismemberment (AD&D) and long term disability (LTD) insurance plan details • Alternate formats 	Benefits and Retirement Operations Exchange Building EXC-ES-0300, 821 Second Ave., Seattle WA 98104-1598 Phone 206-684-1556 ■ 1-800-325-6165 x41556 (outside local calling area) Fax 206-684-1925 Email kc.benefits@metrokc.gov Web www.metrokc.gov/finance/benefits
COBRA and Retiree Benefits	Associated Administrators Inc. (AAI) PO Box 3988, Portland OR 97208-3988 Phone 1-800-320-2915 ■ 1-800-428-4833 (TTY) Fax 503-979-8987 Email cobra@aai-tpa.com
Counseling and Resource Referral <ul style="list-style-type: none"> • Personal, family and work problems • Preauthorization for chemical dependency or mental health care (KingCare plans only) • Financial and legal matters • Child care, elder/adult care 	Making Life Easier Program (24 hours a day, 7 days a week) Phone 1-888-874-7290
Deferred Compensation <ul style="list-style-type: none"> • Enrollment • Changes (beneficiaries, contributions, allocations, etc.) • Quarterly work site seminars 	T. Rowe Price PO Box 17215, Baltimore MD 21297-1215 Phone 1-888-457-5770 Web http://rps.troweprice.com/kingcounty/retirementplan/index.html
Dental <ul style="list-style-type: none"> • Providers • Claims and appeals • Other plan details 	Washington Dental Service (WDS) PO Box 75688, Seattle WA 98125-0688 Phone 206-522-2300 ■ 1-800-554-1907 Fax 206-285-4926 Email cservice@deltadentalwa.com Web www.DeltaDentalWA.com

For Questions About ...	Contact ...
Disability Services <ul style="list-style-type: none"> • Essential job function assessment • Job modification 	Disability Services Program Yesler Building YES-HR-0540 400 Yesler Way, Seattle WA 98104-2683 Phone 206-263-4507 ▪ 1-800-325-6165 x44507 (outside local calling area) Fax 206-684-2017 Intranet ohrm.metrokc.gov/safety/DAProgram/da.htm Local 587 Employees contact Metro Transit Human Resources King Street Center KSC-TR-0419 201 S. Jackson St., Seattle WA 98104 Phone 206-684-1204
Flexible Spending Accounts (FSAs) <ul style="list-style-type: none"> • Account balances • Reimbursement • Other plan details 	Associated Administrators Inc. (AAI) PO Box 3199, Portland OR 97208-3199 Phone 1-800-334-4340 ▪ 1-800-428-4833 (TTY) Fax 1-800-979-8987 Email flex@aai-tpa.com Web www.aai-pca.com
Life Insurance <ul style="list-style-type: none"> • Conversion or portability option • Evidence of insurability (EOI) • For claims, contact Benefits and Retirement Operations 	Aetna Phone 1-800-826-7448 (conversion/portability) ▪ 1-800-523-5065 (EOI)
Long Term Disability (LTD) Insurance <ul style="list-style-type: none"> • Conversion option • Claims and appeals 	CIGNA Phone 1-800-441-1832 (conversion) ▪ 1-800-362-4462 (claims) ▪ 1-800-336-2485 (TTY) Web www.cigna.com/consumer/forms/disability/disability_claim.html
Medical – General <ul style="list-style-type: none"> • Providers (doctors, hospitals, etc.) • Claims and appeals • Identification cards • Personal Health Advisor • Preauthorization • Other plan details (covered expenses, limits, exclusions) 	KingCare – Aetna PO Box 14089, Lexington KY 40512-4089 Phone 1-800-654-3250 ▪ 1-800-654-7714 (preauthorization) Email kingcare@aetna.com Web www.kingcare.com Medical Claims – Aetna Inc., Attn: National Accounts CRT PO Box 14463, Lexington KY 40512 Fax 1-817-417-2026 Group Health Cooperative PO Box 34585, Seattle WA 98124-1585 Phone 206-901-4636 ▪ 1-888-901-4636 ▪ 1-888-457-9516 (out-of-area authorization) Email info@ghc.org Web www.ghc.org

For Questions About ...	Contact ...
Medical – Prescriptions <ul style="list-style-type: none"> • Drug formulary (covered drugs, including generic, preferred brand and non-preferred brand) • Pharmacies • Mail order service • Filing claims and appeals • Identification cards (KingCare members only; Group Health members use medical plan card for prescriptions) 	KingCare – AdvancePCS PO Box 853901, Richardson TX 75085-3901 Phone 1-800-552-8159 Web http://kingcounty.advancex.com (email by selecting Contact Us) Rx Claim Appeals – AdvancePCS, Attn: Prescription Claim Appeals MC109 PO Box 52084, Phoenix AZ 85072-2084 Fax 1-866-443-1172 Group Health Cooperative PO Box 34585, Seattle WA 98124-1585 Phone 1-800-245-7979 (mail order prescriptions) Email info@ghc.org Web www.ghc.org
Vision <ul style="list-style-type: none"> • Providers • Claims and appeals • Other plan details 	Vision Service Plan PO Box 997100, Sacramento CA 95899-7100 (send appeals to the attention of Member Appeals) Phone 1-800-877-7195 ▪ 1-888-354-4434 (discounted laser surgery) ▪ 1-800-428-4833 (TTY) Web www.vsp.com (email through the site)
Washington State Department of Retirement Systems <ul style="list-style-type: none"> • General information • Beneficiary designation • Beneficiary and address changes • Disability benefit options 	Washington State Department of Retirement Systems PO Box 48380, Olympia WA 98504-8380 Phone 1-800-547-6657 ▪ 360-664-7000 (Olympia area) ▪ 360-586-5450 (TTY) Email recep@drs.wa.gov Web www.wa.gov/drs/drs.html
Workers' Compensation <ul style="list-style-type: none"> • On-the-job illness or injury • Benefits • Claims 	Safety & Claims Management Boeing Field AIR-HR-0103 PO Box 80283, Seattle WA 98108 Phone 206-296-0510 ▪ 1-800-325-6165 x60510 (outside local calling area) Fax 206-296-0514 Intranet ohrm.metrokc.gov/safety/claiminfo/comphome.htm

